FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State

Parties must be filed electronically. Docot East 2010 JUL 22 PM 3: 52

	ACSCL 3.0		1
COMMITTEE NAME (Must be same as on Statement of Org	anization)		ZUN
Gonzalez for Treasurer			FORM
IMPORTANT: Indicate by # type of committee you are reporting for: (1)Statewide/Legislative/Judge Standing for Retention Candidate (4)County Central Committee (5)County Candidate (6)City Cand Subdivision Candidate (8)County PAC (9)City PAC (10)School 11)Local Ballot Issue	2)State PAC (3)State Party	ci (F	DR-2 Rev. 12/2009) DISCLOSURE REPORT DISCLOSURE REPORT DISCLOSURE REPORT
CANDIDATE COMMITTEES ONLY:			
Candidate Name	Political Party (if applicable)		agged In
Sharon Gonzalez	Democrat		omputer
Office Sought Linn County Treasurer	District (if Senate or House)		udited
Late reports are subject to possible civil and criminal penalties. Pu candidate's committee, and the chairperson, for any other type of	rsuant to lowa Code sections 68B.32 committee, is the individual responsib	A(7) and 68/ le for filing ti	A.401(3), the candidate, for a mely and accurate reports.
Mandelendishell	319 533.3155	ی	02310
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATE SIGNED
I AM FILING A July 19, 2010	REPORT FOR (1) ELECTIO	M ((2)MON.	ELECTION VEAD
(report date)	Indicate by	<u> </u>	ELECTION TEAR.
☑CHECK IF AMENDMENT TO REPORT DATED July 22, 2	•		
MOLICOVA MACHOMICAL LA MELONI DALED 300 200		Local Com	mittees, enter Date of Election
☐ Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is filed	of Dissolution Form DR-3. d.)	County & L which Elect Linn	ocal Committees, enter County in ion is held
STATEMENT OF CASH ON HAN	<u> </u>	***************************************	
CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the	cash on hand at the end		44.90
of the last reporting period or must be zero if this is fi	irst report filed.)	\$	
ADD TOTAL MONEY TAKEN IN THIS PERIOD			900 00
Schedule A: Cash Contributions total (Attach Sched	• • • • • • • • • • • • • • • • • • • •		800.00
Schedule F: Loans Received total (Attach Schedule	•		
Schedule H: Total Sales of Campaign Property (Atta	•	*********	
(Schedule H applies to Candidates' Com			044.00
	SUB-TOTAL	\$	844.90
SUBTRACT TOTAL MONEY SPENT THIS PERIOD			000 00
Schedule B: Expenditures total (Attach Schedule B)	(**also see debts and loans below)	208.37
Schedule F: Loan Repayments total (Attach Schedu	de F)	***************************************	
CASH ON HAND at the end of this reporting period (if final rep	oort balance must be zero)	\$	636.53
"UNPAID BILLS (From Schedule D - Attach Schedule D)	*************************	\$	65.77
IN KIND CONTRIBUTIONS (From Schedule E - Attach Sche	dule E)	\$	
OUTSTANDING LOANS (From Schedule F - Attach Schedu	ıle F)	\$	100.00
CONSULTANT BREAKDOWN (Schedule G Attached?)		•	_YESNO
CANDIDATE COMMITTEES ONLY:			
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Atta	nch Schedule H)	\$	
STATE COMMITTEES: Submit a reconciled campaign accou	int bank statement in January of ea	ch year.	

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COMMITTEE NAME (Must be same as on Statement of Organization) Gonzalez for Treasurer

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

SCHEDULE D (Rev. 08/98)	INCURRED
	CK THIS BOX MENDING M

DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F)

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice

(for Schedule D)

DATE		has bee	en received.
DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
07/09/10	Sharon Gonzalez 3805 Tarpy Drive Cedar Rapids, IA 52404	Plates and cups for fundraiser	28.91
07/11/10	Sharon Gonzalez 3805 Tarpy Drive Cedar Rapids, IA 52404	Plates, cutlery, napkins and envelopes for fundraiser	19.26
07/14/10	Sharon Gonzalez 3805 Tarpy Drive Cedar Rapids, IA 52404	Postage for fundraiser invitations	17.60
	TOTAL DEBTS OWED BY COMMITTEE AT	SUB-TOTAL THE END OF THIS REPORTING REDICAL	\$ 65.77
			\$ 65.77
*If actual figure is	unknown, show "estimated" beside the figure.	Page	of 1

CANDIDATE COMMITTEES NOTE:

^{*}Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

PAME (Must be same as on Statement of Organization and Property Statement of Organization and Pr	hich is deposited in the 100.00 PERIOD wn if a third party is involuted to the party is involved to the party	esimon	O AMOUNT OF LOAN
AL UNPAID LOANS FROM LAST REPORTING PERIOD \$ RT I - MONETARY LOANS RECEIVED THIS REPORTING (Original source of loan, such as a bank, must be shown that the	100.00 PERIOD wn if a third party is invo LENDER Applicable) bt	olved. Include loans from o	AMENDING FORM candidate's personal funds.) TO AMOUNT OF LOAN cable*) \$ 0.00
DATE RECEIVED (Include Endorser's Name, If MM/DD/YR) 07/09/10 Reversed loan; should be de	wn if a third party is invo	RELATIONSHIPT	S 0.00
(Include Endorser's Name, If (MM/DD/YR) 07/09/10 Reversed loan; should be de 07/11/10 Reversed loan; should be de	Applicable) bt		\$ 0.00
07/11/10 Reversed loan; should be de	bt		0.00
			0.00
07/14/10 Reversed loan; should be de	bt		
			0.00
		TOTAL (PART I)	\$ 0.00
RT II - MONETARY LOAN REPAYMENTS MADE THIS RE (Loans forgiven must be reported on Schedule $E-\ln R$	PORTING PERIODkind Contributions.)		¥
DATE PAID NAME AND ADDRESS OF L MM/DD/YR) (Include Endorser's Name, If A	ENDER opplicable)	RELATIONSHIP TO	O AMOUNT REPAID
			\$
		<u></u>	
	TOTAL CASH REI	PAYMENTS (PART II)	\$
From	TOTAL CASH REI Schedule E TOTAL I		\$ \$

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